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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 09/942,407 TRANSMITTAL August 29, 2001 **Filing Date FORM** Daniel V. SANTI First Named Inventor Group Art Unit 1652 JUL 2:4 2003 (to be used for all correspondence after initial filing) **Examiner Name** K. Kerr 300622004910 ECH CENTER 1600/2900 7 Total Number of Pages in This Submission Attorney Docket Number ENCLOSURES (check all that apply) **Assignment Papers** After Allowance Communication x | Fee Transmittal Form (1 page + dup) (for an Application) to Group Appeal Communication to Board of Fee Attached Drawing(s) Appeals and Interferences Appeal Communication to Group Amendment/Reply Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Petition After Final **Proprietary Information** Petition to Convert to a Provisional Status Letter Affidavits/declaration(s) Application Extension of Time Request (1 page + Power of Attorney, Revocation Other Enclosure(s) Х Change of Correspondence Address (please identify below) dup.) 1. Response to Restriction **Express Abandonment Request Terminal Disclaimer** Requirement 2 pages) 2. Return Receipt Postcard Information Disclosure Statement Request for Refund Certified Copy of Priority CD, Number of CD(s) Document(s) Response to Missing Parts/ Incomplete Application Remarks Response to Missing Parts under 37 CFR 1.52 or 1.53 PATENT TRADEMARK OFFICE SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm **MORRISON & FOERSTER LLP** Carolyn A. Favorito - 39,183 Individual Name

| Date July 15, 2003 | |
|--|--|
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA_22313-1450, on the date shown below. Dated: 7-15-03 Signature: Marian L. Christop | |

Signature

Complete (if applicable)

| 2. EX | TRA | CLAIN | 1 FE | S FOR UTILITY AND REISSUE | 1501 | 1,300 | 2501 | 650 | Utility issue fee (or reissue) | | |
|--|-------------|-------------|-------------|--|-------|---------------------|------------|-------|--|-------|--|
| | | | | Extra Fee from Claims below Fee Paid | 1502 | 470 | 2502 | 235 | Design issue fee | | |
| Total C | laims | | _** : | | 1503 | 630 | 2503 | 315 | Plant issue fee | | |
| Indepei Claims | | | .** , | = x = = | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | | |
| Multiple | | ndent | | | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | | |
| Large | Entity | Small | Entity | | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | | |
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR 1.129(a)) | | |
| 1201 1203 | 84 280 | 2201 | 42 140 | Independent claims in excess of 3 Multiple dependent claim, if not paid | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37CFR 1.129(b)) | | |
| 1204 | 84 | 2204 | 42 | ** Reissue independent claims | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) | | |
| 1205 | 18 | 2205 | 9 | over original patent ** Reissue claims in excess of 20 | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | | |
| | | | | and over original patent | | Other fee (specify) | | | | | |
| SUBTOTAL (2) (\$) 0.00 | | | | | *Redu | ced by E | Basic Fili | ng Fe | e Paid SUBTOTAL (3) (\$) | 55.00 | |
| **or number previously paid, if greater; For Reissues, see above | | | | | | | | | | | |

cant claims small entity status. See 37 CFR 1.27

None

Fee

Code

1051

1052

1053

1804

1805

1251

1252

1253

1254

1255

1401

1402

1403

1451

1452

1453

Fee Paid

0.00

Other

X Credit any overpayments

METHOD OF PAYMENT (check all that apply)

03-1952

Morrison & Foerster LLP

The Commissioner is hereby authorized to: (check all that apply)

Charge any additional fee(s) during the pendency of this

Charge fee(s) indicated below, except for the filing fee

FEE CALCULATION

Fee Description

Utility filing fee

Design filing fee

Reissue filing fee

Provisional filing fee

Plant filing fee

SUBTOTAL (1)

Order

TOTAL AMOUNT OF PAYMENT

Charge fee(s) indicated below

to the above-identified deposit account.

Small Entity

(\$)

375

165

260

375

80

Fee

Code

2001

2002

2003

2004

2005

Check

application

1. BASIC FILING FEE

Large Entity

(\$)

750

330

520

750

160

Code

1001

1002

1003

1004

1005

Deposit

Account

Number

Deposit

Account Name

x Deposit Account

| Name (Print/Type) | Car | olyn A | . Fav | orito | Registration No. (Attorney/Agent) | 39,183 | Te | elephone | (858) 720-5195 | |
|-------------------|-----|--------|-------|-------|--------------------------------------|--------|----|----------|----------------|--|
| Signature | | Ì. | | | | | Di | ate | July 15, 2003 | |
| | | λ | 0 | | | | | | | |
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| I hereby certify that this corres | | | | |
|--|---|-----------------------|------------------------|-------------------------|
| an envelope addressed to: Co Dated: 7-15-03 | mmissioner for Patents, P.O. | Box 1450, Alexandria, | ,VA 22313-1450, on the | date shown below. |
| 17-15-00 | $\mathcal{G}\mathcal{D}$. | | <u>'</u> | |
| Dated: 1/3-03 | Signature: // / / / / / / / / / / / / / / / / / | a D. M. | 'estable | (Marian L. Christopher) |

SUBMITTED BY